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**CENTRAL FAX CENTER****SEP 05 2006****FAX TRANSMISSION****DATE:** September 5, 2006**PTO IDENTIFIER:** Application Number 09/736,232-Conf. #9140  
Patent Number**Inventor:** Scott A. Sirmine**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** RADER, FISHMAN & GRAUER PLLC

Kenneth W. Jarrell

**PHONE:** (248) 593-3310**Attorney Dkt. #:** 65856-0025**PAGES (Including Cover Sheet):** 5**CONTENTS:** Fee Transmittal (1 page)  
One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)  
Request for Continued Examination Transmittal (1 page)  
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Certificate of Transmission (1 page)

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**RADER, FISHMAN & GRAUER PLLC**  
39533 Woodward Avenue, Suite 140, Bloomfield Hills, Michigan 48304  
Telephone: (248) 594-0600 Facsimile: (248) 594-0610

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**CENTRAL FAX CENTER**

**SEP 05 2006**

PTO/SB/17 (07-06)

Approved for use through 01/31/2007, OMB 0651-0032  
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918). <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b> Application Number 09/736,232-Conf. #9140 Filing Date December 14, 2000 First Named Inventor Scott A. Simine Examiner Name H. D. Day Art Unit 2128 Attorney Docket No. 65858-0025	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 910.00			

<b>METHOD OF PAYMENT (check all that apply)</b>	
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<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number: 18-0013    Deposit Account Name: Rader, Fishman & Grauer PLLC	
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<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
<b>Fee Description</b>						<u>Small Entity</u>	
						<b>Fee (\$)</b>	<b>Fee (\$)</b>
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
=		x	=				
HP = highest number of total claims paid for, if greater than 20.							
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>				
=		x	=				
HP = highest number of independent claims paid for, if greater than 3.							
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>		
- 100 =	/50	(round up to a whole number) x		=			
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1251 Extension for response within first month						120.00	
1801 Request for continued examination (RCE) (see 37 ...)						790.00	

<b>SUBMITTED BY</b>			
Signature	<i>Kenneth W. Jarrell</i>	Registration No. (Attorney/Agent)	52,484
Name (Print/Type)	Kenneth W. Jarrell	Telephone	(248) 593-3310
		Date	September 5, 2006

Fee Transmittal I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted by facsimile to the Patent and Trademark Office, facsimile no. (571) 273-8300, on the date shown below. Dated: September 5, 2006    Signature: <i>Victoria L. Wood</i> (Victoria L. Wood)	
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PTO/SB/97 (08-04)

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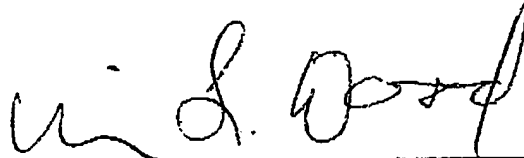
Application No. (if known): 09/736,232

Attorney Docket No.: 65856-0025

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Fee Transmittal (1 page)

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